					U. S. Peter	a med The	omena (me de	DE A	HARRY S	COMMERC	
U. S. Pater. Under the Processick Reduction Act of 1995, no persons are required to recover to a collection.							I Application or Prochet Number					
PATENT APPLICATION FEE DETERMINATION RECORD							09936726					
CLAIMS AS FILED - PART ((Cohena I) (Cohena I)							L ENI	ПТҮ	OR SMALL ENTITY			
FOR			NUMBER FILED		NUMBER EXTRA		31	FEE		RATE	FEE	
							,,	16.1				
BASIC FEE (1) CFB 1.M(ii)							7.4	430	OR		s	
TOTAL CLAIMS DICHALHON		4	4/ minus 20 ·		10. 21		-1/	189,-	OR	×3 =		
INDEPENDENT CLAIMS profit Liepy		ins 2	2		1.0		=1		OR	×=		
MULTIPLE DEPENDENT CLAIM PRESENT 07 CFR 1,14(4)				<u> -</u>	//	35,-	OR	+=				
If the difference in column 1 is less than zero, enter "O" in column 2						TOT	AL L		OR	TOTAL		
The Change (Column 1) (Column 2) (Column 3)							LL ENT	ri TY	OR	OTHER T		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT		addi Ional Fee		RATE	ADDI- TIONAL FEE	
	Total Or CFR LINGS	• 41	Minus	•• 41	- Ø	Z3_		1 0	OR OR	x \$ =		
	tadependent or cra LIND	• 2	Minus	··· 2	-0	х	_=	0	OR	·		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OF OR LIKE								OR	+=		
(Colores I) (Colores 2) (Colores 3)							AL E		OR	TOTAL DOIT, FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	1 -	addi- Ional Fee		RATE	addi- tional fee	
	Total proratings	. 64	Minus	•• 41	-23	1	- 2	187.W	OR OR	: S		
Á	ladependent arcra (1400	• 4	Minus	 3	- 1	<u></u>	/	13.00	OR	×=		
4		ENTATION OF M	ULTIPLE DE	PENDENT CLASM	bs curriete]}_			OR	+ <u>*</u>		
52505 (Column 1) (Column 2) (Column 3)							TAL É	250.ud	阳	DOTAL DOTT. FEE		
AMENDMENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA*		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• 47	Minus	. 64	•	× 5_			OR	x \$=		
	Independent OTERLINO	• 3	Minus	••• 4	- /				OR OR	×		
	FIRST PRESENTATION OF MULTIPLE DEFENDENT CLADA (FIGREISA)] •			OR	·		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								OR	TOTAL ODIT. FEE		
* If the entry in column 1 is less than the entry in column 2, write "O' in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 70, enter "20". *** If the "Highest Number Previously Paid For" (Notal or Independent) is the highest number found in the appropriate box in column 1. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

Burdes Herr Statement: This form is estimated to take 0.2 hours to complete. These majores sember found in the appropriate box in column 1.

Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office